



*The City of Hopewell, Virginia*

300 N. Main Street · Department of Development  
(804) 541-2220 · Fax: (804) 541-2318

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**SUBDIVISION / ADMINISTRATIVE RESUBDIVISION**

**APPLICATION**

**A. PLEASE CHOOSE THE TYPE OF LAND USE DIVISION YOU ARE REQUESTING.**

SUBDIVISION \_\_\_\_\_  
APPLICATION FEE: \$250

ADMIN. RESUB. \_\_\_\_\_  
APPLICATION FEE: \$50

**B. PROPERTY INFORMATION**

SUBDIVISION / ADMIN. RESUB. TITLE:

\_\_\_\_\_

PROPERTY ADDRESS / LOCATION:

\_\_\_\_\_

PARCEL #: \_\_\_\_\_ - \_\_\_\_\_ SQUARE FEET: \_\_\_\_\_ ZONING DISTRICT: \_\_\_\_\_

NUMBER OF EXISTING / PROPOSED LOTS: \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_ NEW PUBLIC STREET \_\_\_\_ EXISTING PUBLIC RIGHT-OF-WAY

**C. APPLICANT INFORMATION**

APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

INTEREST IN PROPERTY: \_\_\_\_\_ OWNER OR \_\_\_\_\_ AGENT

\*IF YOU ARE NOT THE OWNER OF THE PROPERTY, PLEASE PROVIDE DOCUMENTATION THAT GIVES YOU PERMISSION TO APPLY FOR THIS APPLICATION.\*

**D. OWNER INFORMATION**

OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**E. ENGINEER/SURVEOR INFORMATION:**

ENGINEER/SURVEYOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

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**SUBMISSION REQUIREMENTS**

*SIX (6) COPIES OF A PLAT OF THE SUBDIVISION / ADMINISTRATIVE RESUBDIVISION  
MUST ACCOMPANY THIS APPLICATION*

- FOR A SUBDIVISION, THE SUBDIVISION PLATS MUST BE ON 17" x 22" SHEETS AND FOLLOW THE GUIDELINES SET FORTH IN ARTICLE 6-13 OF THE SUBDIVISION ORDINANCE.
- FOR AN ADMIN. RESUB., THE "BOUNDARY LINE ADJUSTMENT" (BLA) PLATS MUST FOLLOW THE GUIDELINES SET FORTH IN ARTICLES 6-15 AND 6-16 OF THE SUBDIVISION ORDINANCE.

*AS OWNER OF THIS PROPERTY OR THE AUTHORIZED AGENT THEREFOR, I HEREBY CERTIFY THAT THIS APPLICATION AND ALL ACCOMPANYING DOCUMENTS ARE COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.*

\_\_\_\_\_  
**APPLICANT SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**APPLICANT PRINTED NAME**

\_\_\_\_\_  
**DATE**

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OFFICE USE ONLY

DATE RECEIVED \_\_\_\_\_

DATE OF ACTION \_\_\_\_\_

\_\_\_\_\_ APPROVED

\_\_\_\_\_ DENIED